

Form CPF M 102: Campaign Finance Report

Municipal Form RECEIVED TOWN CLERK
Office of Campaign and Political Finance GRAFTON, MA

2022 JAN 12 PM 4: 04
File with: City or Town Clerk or Election Commission

Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election
Raymone E. Mead	Committee To Elect Ray Mead
Candidate Full Name (if applicable)	Committee Name
Selectboard	J. Roger Currier, Jr
Office Sought and District	Name of Committee Treasurer
217 Brigham Hill Road, North Grafton, MA 01536 Residential Address	3 Mathew Circle, North Grafton, MA 001536 Committee Mailing Address
E-mail: raymeadgfd2@gmail.com	E-mail: skipcurrier@charter.net
Phone # (optional): 508-839-8590	Phone # (optional): 508-981-4197
SUMMARY BALANCE	E INFORMATION:
Line 1: Ending Balance from previous report	\$ 159.54
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	\$ 159.54
Line 4: Total expenditures this period (page 5, line	\$ 10.00
Line 5: Ending Balance (line 3 minus line 4)	\$ 149.54
Line 6: Total in-kind contributions this period (pag	ge 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Homefields Credit Uni	ion
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in a signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I box Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the leactivity, of all persons acting under the authority or on behalf of this committee in account incurred any liabilities nor made any expenditures on my behalf during this reporting persons activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf units. Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign ecordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: January 11 2022 only) Dest of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions, period that are not otherwise disclosed in this report. Dest of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
	(No contributions received in reporting period	
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ine 9: Total Receip	ots over \$50 (or listed above)			
ine 10: Total Receip	pts \$50 and under* (not listed above)			
ing 11. TOTAL D	ECEIPTS IN THE PERIOD		1	
			Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
		**	No contributions received in reporting period
		88 30 30 30 30 30 30 30 30 30 30 30 30 30	
Line 9: Total Recei	ipts over \$50 (or listed above)		
ine 10: Total Rece	cipts \$50 and under* (not listed above)		
ine 11: TOTAL I	RECEIPTS IN THE PERIOD		Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

B	To Whom Paid	A		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
December 31 20	Homefield Credit Union	86 Worcester St, North Grafton, MA 01536	Account dormancy fee	\$ 10.0

		Line 12: Total Expenditures ov	er \$50 (or listed above)	\$ 10.0
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$ 10.00

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
			No additional expenditures page	
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		Line 12: Expenditures over \$5	60 (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on social line 4. s.	Line 14: TOTAL EXPENDI	TIDES IN THE DEDION	
			should include only those expenditure	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			No In-Kind donations received	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			No liabilities	
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	Enter on page 1, line 7 →			

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